| PATENT APPL ATION FEE DETERMINATION RE RD 89744020                      |   |                  |                              |                        |                  |             |            |                        |          |                               |                        |  |
|---|---|------------------|------------------------------|------------------------|------------------|-------------|------------|------------------------|----------|-------------------------------|------------------------|--|
| CLAIMS AS FILED - PART I<br>(Column 1)                                  |   |                  |                              |                        | (Column 2) SMA   |             |            | ALL ENTITY PE C        |          | OTHER THAN<br>OR SMALL ENTITY |                        |  |
| TOTAL CLAIMS  |   |                  |                              |                        |                  |             | RATE       | FEĘ                    |          | RATE                          | FEE                    |  |
| FOR 01 19 01  |   | NUMBER FILED     |                              | NUMBER EXTRA           |                  | -           | Basic Fee  |                        | OR       | Basic Fee                     | 860                    |  |
| TOTAL CHARGEABLE CLAIMS   |   | 24minus 20=      |                              | • 4                    |                  | ,           | X\$ 9=     |                        | OR       | X\$18=                        | 72                     |  |
| NDEPENDENT CL   | // minus 3 =                              |                  |                              |                        |                  | X40=        |            | OR                     | X80=     | SD                            |                        |  |
| AULTIPLE DEPEN  | RESENT                                    |                  | U                            |                        |                  | +135=       |            |                        | +270=    | 271                           |                        |  |
| "If the difference in column 1 is less than zero, enter "0" in column 2 |   |                  |                              |                        |                  |             | TOTAL      |                        | OR<br>OR | TOTAL                         | o IU                   |  |
| 1.4   | LAIMS AS A                                |                  |                              |                        |                  |             | IOIAL      |                        | On       | OTHER                         | THAN                   |  |
| 71/30/0°1C  | (Column 1)                                |                  | (Colu                        | mn 2)                  | (Column 3)       |             | SMALL      |                        | OR       | SMALL                         |                        |  |
| Total Independent   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | PIGF<br>NUN<br>PREVI<br>PAID | BER<br>OUSLY           | PRESENT<br>EXTRA |             | RATE       | ADDI-<br>TIONAL<br>FEE |          | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| Total   | .20                                       | Minus            | 2                            | 4                      | =                |             | X\$ 92     |                        | OR.      | X\$18 <del>=</del>            |                        |  |
| Independent   | . 4                                       | Minus            | *** (                        | +                      | 8                |             | X40=       |                        | OR       | X80=                          |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                          |   |                  |                              |                        |                  |             | +135=      |                        |          | +270=                         |                        |  |
|   |   |                  |                              | •                      |                  |             | TOTAL      | <del>\</del>           | OR       | TOTAL                         | _                      |  |
| 03/23/  | 0)  |                  | 10.1                         | 0\                     | (C-1: 2)         |             | ADDIT. FEE |                        | OR       | ADDIT. PEE                    |                        |  |
|   | (Column 1) CLAIMS REMAINING               |                  | 1000                         | mn 2)<br>KEST<br>IBER  | (Column 3)       |             | 2.75       | ADDI-                  |          | RATE                          | ADDI-<br>TIONAL        |  |
|   | AFTER<br>AMENOMENT                        |                  |                              | FOR                    | EXTRA            |             | RATE       | FEE                    |          | HATE                          | FEE.                   |  |
| Total Independent   | · 20                                      | Minus            | 2                            | 4                      | • 0              |             | X\$ 9=     |                        | OR       | X\$18=                        |                        |  |
| Independent   | . 4                                       | Minus            | •••                          | 1                      |                  |             | X40=       |                        | OR       | X80=                          |                        |  |
| FIRST PRESE   | NTATION OF M                              | ULTIPLE DEF      | ENDEN                        | TCLAIM                 |                  | j           | +135=      |                        | OR       | +270=                         |                        |  |
|   |   |                  |                              |                        |                  |             | TOTAL      |                        | OR       | TOTAL                         | A                      |  |
|   | (0.1 A)                                   |                  | ical.                        | 21                     | (Column 3)       |             | ADDIT. FEE |                        |          | ADDIT. FEE                    |                        |  |
|   | (Column 1)<br>CLAIMS                      | 10/20/20/20      | HIG                          | mn 2)<br>HEST          | 5 000            | 1           |            | ADDI-                  | 1        |                               | -ADDI-                 |  |
| Total Independent   | REMAINING<br>AFTER<br>AMENOMENT           |                  | PREV                         | ABER<br>HOUSLY<br>DFOR | PRESENT          |             | RATE       | TIONAL<br>FEE          |          | RATE                          | TIONAL<br>FEE          |  |
| Total   | •   | Minus            | ••                           |                        | 5                |             | X\$ 9=     |                        | OR       | X\$18≃                        |                        |  |
| independent   | •   | Minus            | •••                          |                        | 5                | 1           | X40=       |                        | OR       | X80=                          |                        |  |
| FIRST PRESE   | NTATION OF N                              | IULTIPLE DE      | PENDEN                       | T CLAIM                |                  |             |            | -                      | 1        |                               | -                      |  |
| * If the entry in colu  | one 4 is free these                       | The enter is set | uma 9 wa                     | te "O" in ~            | olumn 3.         |             | +135=      |                        | OR       | +270=                         |                        |  |
| " If the entry in column if the "Highest Nu                             | mber Previously F                         | aid For IN TH    | IS SPACE                     | is less th             | an 20, enter "20 | ). <b>°</b> | ADDIT. FEE |                        | OR       | ADDIT. FEE                    | <u></u>                |  |

Application or Docket Number

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